2003/2004: Report 6

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Audit of the Government's Review of Eligibility for Disability Assistance

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The Honourable Claude Richmond
Speaker of the Legislative Assembly
Province of British Columbia
Parliament Buildings
Victoria, British Columbia
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Dear Sir:

I have the honour to transmit herewith to the Legislative Assembly of British Columbia my 2003/2004 Report 6: Audit of the Government's Review of Eligibility for Disability Assistance.

Wayne Strelioff

Wayne Strelioff, FCA
Auditor General

Victoria, British Columbia
February 2004

copy: Mr. E. George MacMinn, Q.C.
Clerk of the Legislative Assembly

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Auditor General's Comments

Wayne Strelioff, FCA
Auditor General

On September 30, 2002, the Employment and Assistance for Persons with Disabilities Act took effect in British Columbia. According to the government, the goal of the new legislation is to promote greater independence for people with disabilities, security of income, enhanced well-being and participation in the community.

The new Act addresses what the government believed were deficiencies in the previous legislation. Notable changes include:

- Costs paid by individuals to cope with their disability are no longer a criterion for assessing eligibility.
- Having a mental disorder, or a cyclical or episodic illness has been added as a new criterion.
- An individual who is able to leave disability assistance for a period of time is not required to reapply for disability status if he or she must later seek assistance again.
- The legislation no longer considers an individual's disability status to be permanent. Ongoing review of each client's status is now required to confirm his or her eligibility. The Minister of Human Resources has the right to cancel a person's eligibility designation if the requirements of the Act are not met.

To confirm that everyone receiving assistance under the old Act was still eligible for assistance under the new Act, the Ministry of Human Resources reassessed all of its clients. It first carried out an internal review of all client files to determine if there was enough information to assess whether people were eligible or not under the new criteria. People whose files did not have the necessary information were asked to complete a new form.

While the ministry's review of eligibility was underway, I received requests from the general public, an advocacy group and the Leader of the Opposition to examine the ministry's approach. After evaluating these requests, I concluded that since this was a large program for the ministry and one that affected so many people, it would be in the interests of the Legislative Assembly and the citizens of the province for me to conduct an audit. My office therefore set out to examine whether the Ministry of Human Resources took appropriate steps in ensuring that former disability benefit recipients satisfied the eligibility criteria of the new Employment and Assistance for Persons with Disabilities Act.

We focused on answering the following questions:

- Did the ministry adequately evaluate the timing and extent of the work needed to ensure that former disability benefit recipients met the eligibility criteria of the new Act?
- Did the ministry adequately manage the work it undertook, and did it use reasonable methods to assess the eligibility of individual recipients?
- Did the ministry achieve its review objectives?

Because it is the right of government to set policy, we did not question the government's changes to the Disability Benefits Program Act. Rather, we focused our attention on examining how those policy changes were implemented. We also did not examine the ministry's management of the program.

The findings and conclusions presented in this report are based on evidence gathered from April to November 2003. The quantitative information we provide was drawn from various ministry sources indicated in the text. Although we checked the information for reasonableness, we did not audit it.

Our examination was carried out in accordance with the standards for assurance engagements recommended by the Canadian Institute of Chartered Accountants and, accordingly, included such tests and other procedures as we considered necessary in the circumstances.

Overall Conclusion

We concluded that although the ministry was required by the new Act to ensure that people receiving disability benefits met the new eligibility conditions, the ministry moved too quickly in fulfilling this responsibility. It embarked on a fast-track review of all former disability benefit recipients before (1) establishing that a significant risk existed of paying benefits to ineligible recipients and (2) fully investigating other options for confirming eligibility.

In the end, the ministry did not achieve the significant cost savings it thought it would by doing the review, as almost all benefit recipients were found to meet the new eligibility requirements. The review also increased anxiety among its disabled clients.

After deciding on the type of review to carry out, the ministry did adequately manage the work and used reasonable and impartial methods to assess individual recipient eligibility. The review helped the ministry meet the requirements of the new Act and provided a higher level of assurance that only eligible clients are receiving assistance.

Key Findings

The ministry did not adequately evaluate how best to meet its responsibilities to assess eligibility under the new Act

The new Act says that people receiving disability assistance under the previous Act are still entitled to receive the assistance as long as they meet the new conditions of eligibility. In our view, when and how to assess whether its clients meet those requirements was up to the ministry to decide and should have been based on three key factors:

- an adequate evaluation of the risk that the ministry might pay benefits to individuals who were ineligible under the new criteria;
- a cost-benefit analysis of the different options for carrying out the work; and
- sufficient consideration of how such an assessment might affect assistance recipients.

If the risk of making extensive mispayments was high, then working to identify ineligible recipients and stopping benefit payments immediately would be appropriate. If the risk was low, however, a more gradual approach to assessment would be more reasonable.

The ministry decided to do a fast-track review of all former disability benefit recipients to determine who did, and who did not, meet the new eligibility criteria. We believe that a key assumption of the ministry in arriving at this decision was that a large number of recipients would fail to qualify, therefore losing their disability status, and the result would be significant cost-savings to government and taxpayers. But, the ministry did not adequately check the reliability of this assumption, which, as the final outcome shows, was unfounded.

In our view, after the Act came into force, a well-designed statistical sample, of the 18,705 recipients who did not have adequate information in their files to confirm eligibility, would have established a more reliable estimate of the number of recipients who did not qualify for benefits. Such a sample would have shown that the risk of payments to ineligible clients was low, and that the ministry could therefore have taken a more gradual approach to reviewing recipients outside the sample.

With this simple step, the whole review process could have been less costly and probably less onerous for both the ministry and the recipients.

As it happens, the ministry ended up using a more gradual approach when it dealt with a large number of mentally ill benefit recipients. Among the 18,705 clients who were asked for additional information, 5,629 had a primary diagnosis of mental illness. According to the ministry, after it had received and adjudicated 903 completed forms from these recipients—all confirming their eligibility status—it decided to exempt the remaining 4,726 individuals in the group from having to complete the form.

Although the ministry considered six alternatives to meet the Act requirements for confirming eligibility, it did not adequately evaluate the potential costs and benefits of each option or the potential effects each might have on recipients. And, once it selected the option it did, the ministry did not clearly demonstrate that the chosen approach and its timing were the best alternative in light of the risks involved, the costs and benefits of the various alternatives, and the possible impact of each approach on recipients.

Given the review it chose to carry out, the ministry did adequately manage the work and used reasonable methods to assess eligibility

After the ministry decided on its approach to confirming client disability status, we expected it to have a process for ensuring that its review was well managed. We looked for:

- a comprehensive plan developed by the ministry to guide the work;
- records showing that the review's progress had been monitored to identify and respond to concerns; and

- evidence that external stakeholders had been consulted about the review.

We also expected the ministry to have taken adequate steps to ensure that the methods used to assess individual recipient eligibility were reasonable given the clients and sensitivities involved.

We found that the ministry developed a detailed plan for its review. It also put a strategy in place to deal with concerns that might arise while the review was being done. In our view, all these plans helped to ensure that the eligibility review work was adequately managed and controlled.

As well, the ministry adequately monitored the review work to ensure it proceeded as planned. Key elements of the work were assigned to individual ministry executive members and working teams, and target completion dates were set. Team progress was regularly monitored and the ministry executive met frequently to review progress. Formal control processes were used to identify, track and resolve issues.

Recognizing the importance of consulting with key stakeholders, the ministry identified the important groups and used reasonable processes to consult with affected ministries and professional organizations. Less effective, however, was the ministry's consultations with advocacy groups.

In addition, the ministry took several steps to ensure its review methods were reasonable and impartial, including:

- confirming eligibility status for about 70% of the recipients by reviewing the material in its files;
- testing the appropriateness of the 23-page form it used to gather information from the remaining recipients;
- taking steps to ensure individual recipient eligibility reviews were done properly;
- providing assistance to recipients having difficulty with the process;
- offering an appeal process; and
- providing transitional benefits to recipients whose disability status was cancelled.

In summary, we found that once the ministry decided on the review it wanted to carry out, it adequately managed the work and used reasonable and impartial methods to assess individual recipient eligibility.

The review helped the ministry meet the requirements of the new Act and increased assurance that only eligible clients receive assistance, however, it also increased anxiety among disabled clients and failed to achieve the cost savings the ministry expected

An important part of project management is the follow-up evaluation. A meaningful evaluation specifies at the start of the project what the objectives are for undertaking the work and how performance will be measured. When the project is completed, the evaluation determines the extent to which the objectives have been met. The costs and benefits of the project are compared against those estimated, and the results achieved are compared against initial assumptions.

We found that the ministry did not establish a complete evaluation framework at the start of the review. This means it is unable to fully evaluate the costs and benefits of the work and the extent to which the objectives were achieved. We acknowledge that the ministry has brought about the changes needed to meet the requirements of the new Act, and gained a higher level of assurance that only eligible clients receive assistance. Still, another outcome of the review was the increased anxiety it created among disabled clients.

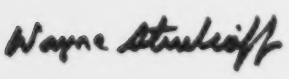
The ministry's initial estimates about the likely number of ineligible clients that would be identified during the review were all high, 6,200 or more. In fact, only 400 (0.6%) of the cases reviewed were found ineligible and of those, only 46 had their cases closed. Another 40 reapplied and were granted disability status, and the remaining 316 have begun receiving other forms of government assistance. The ministry was therefore far from attaining the cost savings it originally expected.

Looking forward

Should a project similar to the disability benefits review be considered in the future by a ministry or other public sector entity, it should ensure that:

- clear objectives for the work are established from the start;
- an appropriate evaluation of risks is carried out before decisions are made about how and when the work should be done; and
- a plan is in place for evaluating the success of the project (relative to its objectives) at its completion.

Now that the Ministry of Human Resources has completed its eligibility review, I believe it should establish a suitable process to review its client files regularly to confirm eligibility. Such a process will provide the Legislative Assembly and the people of the province with ongoing assurance that monies are spent effectively and for the purposes intended.



Wayne K. Strelioff, FCA
Auditor General

Victoria, British Columbia
February 2004

Detailed Report

Background

The Employment and Assistance for Persons with Disabilities Act became law on September 30, 2002, replacing the Disability Benefits Program Act. According to the government, the new legislation is intended to promote greater independence for people with disabilities through income security, enhanced well-being and more opportunity for greater participation in the community.

In defining who might qualify as a person with disabilities, the new Act states:

> The Minister may designate a person who has reached 18 years of age as a person with disabilities if the Minister is satisfied that the person has a severe mental or physical impairment that:
>
> - in the opinion of a medical practitioner is likely to continue for at least 2 years, and in the opinion of a health professional directly and significantly restricts the person's ability to perform daily living activities either continuously, or periodically for extended periods, and
> - as a result of those restrictions, the person requires help to perform those activities.

To further clarify whether a person qualifies, the Act also provides the following definitions:

- a person who has a severe mental impairment includes a person with a mental disorder, and
- a person requires help in relation to a daily living activity if, in order to perform it, the person requires an assistive device, the significant help or supervision of another person, or the services of an assistance animal.

The Minister of Human Resources is required to review benefit recipients approved under the former legislation (previously referred to as Disability Benefit 2 clients) to determine their eligibility under the revised criteria. The Minister can cancel a person's disability designation if his or her situation does not meet the requirements of the Act.

Both the Act and the administrative changes made by the ministry to implement it address several weaknesses the government and ministry officials believed were issues in the previous legislation and administrative processes:

- People with mental disorders were not specifically included in the definition of people with a disability.
- Undefined terms in the old Act resulted in subjective interpretations of, for example, "extensive assistance or supervision" and "reasonable time."
- Under the old Act, the criteria to determine status included "unusual and continuous expenditures" associated with a person's disability. However, the exact meaning of unusual and continuous expenditures was not defined and no other province used this as a measure of disability. The criterion was also inconsistent with human rights case law, where the level of impairment of a person's ability to carry out the normal functions of life is the focus, not the level of expenditures to determine compensation.
- By ministry policy, a person's status, once determined, was considered permanent and there was no ongoing requirement to review it.
- The previous application form was inadequate for providing the ministry with the information it needed to make decisions about people's eligibility.
- The regulation did not specify who qualified as an assessor of a person's impairments and their impact on performance of daily living activities. Assessors did not need to be health professionals.
- The public expressed concerns about the eligibility criteria, the application form and the appeal process.

As well, Treasury Board expressed concerns as early as 1998 about the rapid increase of program costs. Also, ministry research showed that indiscriminately granting disability status to clients who really should not qualify increases their dependence on assistance. Not granting this status to such clients reduces their dependence without harming their health.

The disability benefit program accounts for about one-third of the ministry's total budget

The monthly disability assistance payment to a single individual is currently $786. The assistance paid to a person with the Persistent Multiple Barriers designation is $608 a month, and the assistance paid to a person receiving the basic income assistance rate is $510 a month. Appendices A and B provide detailed information on these three types of assistance and the rates paid.

When the ministry started its review it had 61,932 clients receiving benefits, including 23,625 who were receiving only partial assistance, such as money to cover the costs of medical services, long-term care user fees and a comfort allowance.

According to the ministry, the Employment and Assistance for Persons with Disabilities Act offers the following benefits

- The legislation will facilitate a cultural shift from entitlement to employment and self-sufficiency for those who are able, while sustaining assistance for those most in need.
- Recipients will not retain the Persons with Disability designation for life. Instead, their situation will be reviewed periodically and the Minister may rescind a designation where it appears that a recipient no longer qualifies for it.
- Caseworkers will decide on the frequency of an internal review based on the information provided by the client through his or her application, but all cases will be reviewed at least once every five years. Only clients whose medical conditions are likely to have improved will be asked for further information.
- The legislation provides assistance to those individuals who have a severe mental or physical impairment that significantly restricts their ability to perform daily living activities either continuously or periodically for extended periods.
- For the first time, the new definition specifically includes people with mental disorders.
- New policies and services encourage people with disabilities to become involved in employment or volunteer programs. People with disabilities receive the same rate of assistance regardless of their ability to become independent through employment.
- The legislation applies to people with cyclical or episodic illnesses. A client with the disability designation who leaves assistance is not required to reapply for the designation if he or she requests assistance later. A system of rapid reinstatement for these clients has been set up.
- The new legislation recognizes that, as a disabled person's ability to work may be cyclical, or limited to part-time employment, he or she may need different levels of support at different times. The earnings exemption, that is, the amount a person can earn without losing support payments, has also doubled from $200 to $400 per month.
- Those who are able to become independent through employment receive support services, including job training and placement, technical equipment, physical accommodation and follow-up workplace support.
- The legislation promotes greater independence for people with disabilities, including security of income, enhanced well-being and more opportunity for participation in the community.

Source: Ministry of Human Resources

Exhibit 1 summarizes the ministry's expenditures for the disability program, its expenditures for employment programs and its caseload information from 1999/2000 to 2003/2004.

As the exhibit shows, the disability program portion of the ministry's total expenditures increased from 18.1% in 1999/2000 to 31.7% in 2003/2004. The expenditures for the program increased from $310 million in 1999/2000 to $450 million budgeted for the current fiscal year, 2003/04. Similarly, the expenditures for employment programs increased from $13.1 million in 1999/2000 to a budgeted expenditure of $24 million for the current fiscal year. The caseload also increased substantially in the years from 1999/2000 to 2001/2002, but the rate of increase has since slowed markedly.

Exhibit 1

Disability program expenditures and caseloads, 1999/2000 to 2003/2004

($millions)

	1999/00	2000/01	2001/02	2002/03	2003/04 (Budget)[a]
Total ministry expenditures[a]	1,715.3	1,747.9	1,775.9	1,516.4	1,417.5
Expenditures for the disability program (2003/04 budget)[b]	310.0	358.5	414.6	435.2	450.0
Percentage of ministry expenditures	18.1%	20.5%	23.3%	28.7%	31.7%
Rate at which disability program expenditures have grown from previous year	10.0%	15.6%	15.6%	5.0%	3.4%
Expenditures for employment programs[a]	13.1	12.3	12.9	12.8	24.0
Growth rate from previous year	3.1%	-6.1%	4.9%	-0.8%	87.5%
Average caseload per year (2003/04 shows April to November average)[c]	34,838	39,094	44,060	46,175	47,543
Rate at which average growth rate for the year has grown from previous year	10.4%	12.2%	12.7%	4.8%	3.0%

Source: Ministry of Human Resources

[a] Actual expenditures are restated for years 1999/00 to 2002/03 on a basis comparable to the estimate for 2003/04.

[b] Expenditures include direct payments to persons with disabilities for support, shelter and supplementary assistance.

[c] Cases are family units receiving disability assistance. This assistance consists of a support allowance and a shelter allowance. In some family units (childless couples or two-parent families), both adults may be designated as persons with disabilities.

Sequence of events related to the review of disability status carried out by the Ministry of Human Resources

Date	Event
Fall of 2001	Government carries out the Core Services Review of the Ministry of Human Resources programs.
May 29, 2002	Legislative Assembly passes the Employment and Assistance for Persons with Disabilities Act.
Spring/summer of 2002	Ministry prepares plans to implement the new Act. Ministry consults with stakeholders about the review. Ministry carries out an internal review of files to determine eligibility under the new Act.
September 30, 2002	New Act is proclaimed. Ministry sends out 18,705 letters to disability clients who have insufficient information in their files to enable the ministry to determine eligibility. Clients are asked to complete the New Persons with Disabilities Designation Review form and return it to the ministry by January 15, 2003.
October – November 2002	Ministry sends out reminder letters to clients who have not returned the forms.
November 2002 – July 2003	Forms received by the ministry are reviewed to determine eligibility. Clients informed of outcome of the review.
November 21, 2002	Ministry confirms or exempts 5,629 (of the 18,705) clients on the basis of their having a primary diagnosis of mental illness. Ministry extends the deadline for submitting designation review forms from January 15, 2003 to March 15, 2003.
January 20, 2003	Ministry sends out letters informing clients that the deadline has been extended to March 15, 2003.
June 15, 2003	Those individuals who do not qualify under the new eligibility criteria continue to receive assistance to June 15, 2003, unless circumstances warrant an extension.

In the following sections of this report, we provide our findings and conclusions under the three questions posed in our audit.

- Did the ministry adequately evaluate the timing and extent of the work needed to ensure that former disability benefit recipients met the eligibility criteria of the new Act?
- Did the ministry adequately manage the work it undertook, and did it use reasonable methods to assess the eligibility of individual recipients?
- Did the ministry achieve its review objectives?

Did the ministry adequately evaluate the timing and extent of the work needed to ensure that former disability benefit recipients met the eligibility criteria of the new Act?

With the introduction of the new Act, the ministry was charged with ensuring that everyone who was receiving assistance under the former Act satisfied the new conditions of eligibility. The choices about the timing and extent of work needed to meet that legal requirement were left up to the ministry to decide.

The ministry understood that such an undertaking would involve spending significant amounts of taxpayer money, affect a large number of people and potentially create high levels of anxiety in a population already in challenging circumstances. We therefore expected the ministry to ensure that its choice of approach was clearly appropriate to the task. We looked for evidence that the ministry had adequately evaluated the risk of it paying benefits to individuals who were ineligible under the new provisions; had conducted a cost-benefit analysis of the different options for doing the work; and had considered how the review might affect assistance recipients.

We concluded that although the ministry was required by the new Act to ensure that people receiving disability benefits met the new eligibility conditions, the ministry's decision to use a fast-track approach to review the eligibility of former benefit recipients under the new Act was not justified. We believe that a significant factor in the ministry's decision was the assumption that the review would identify a large number of ineligible people, yet that assumption was not adequately tested before the review began.

The ministry did not adequately evaluate how best to meet its responsibilities to assess eligibility under the new Act

Under the transitional provisions in the new Act, a "person with disabilities" who was receiving assistance under the former Disability Benefits Program Act was deemed to be getting assistance under the new legislation. However, to continue receiving assistance, the person had to satisfy the conditions of eligibility as laid out in the new Act. This meant that the Minister of Human Resources had to be satisfied that the person: 1) had a severe mental or physical impairment that was likely to continue for at least two years and directly and significantly restricted the person's ability to perform daily living activities; and 2) needed help to perform those activities.

Did the ministry adequately evaluate the timing and extent of the work needed to ensure that former disability benefit recipients met the eligibility criteria of the new Act?

Given that the ministry was required to review the former benefit recipients to determine their eligibility, it needed to make choices about the timing and extent of that review work. In our opinion, those choices should have been based on an adequate evaluation of the risk that the ministry was paying benefits to individuals who were ineligible under the new criteria. If the risk were found to be high, then an immediate response to identify ineligible recipients and stop benefit payments would be appropriate. A low risk, however, would call for a more gradual response.

The ministry should also have evaluated the costs and benefits of the different options for doing the work, and adequately considered how these various options might affect its clients.

The ministry decided to review the eligibility of all the 61,932 former disability benefit recipients over a relatively short time period. The first phase (June through September 2002), involved an internal review of recipient files to determine whether there was adequate evidence to determine eligibility under the new requirements. The second phase (September 2002 through January 2003, later extended to March 2003), involved requesting additional information from those recipients whose eligibility could not be confirmed in the first phase.

The ministry told us it chose this approach because it believed that it had to act quickly to meet the intent of the new Act. In our view, the new legislation did not impose such a requirement on the ministry and the review could have been carried out over a longer time period.

We think that the ministry's decision to fast-track the review hinged on concerns it had about the Disability Assistance Program dating back to 1998. The ministry was particularly troubled by the growth rates in client numbers both in 2000/2001 and 2001/2002 (Exhibit 1). Under the new eligibility rules, the ministry thought this trend might be reversed with between 6,177 and 9,750 recipients having their disability status rescinded. These estimates represented the difference between the ministry's projection of program growth before eligibility rules were changed in 1996 and the actual growth following those changes. However, as the ministry explained to us, these figures were very rough. They were based partly on a limited review of client files that, in many instances, lacked the information

necessary to make an assessment; and partly on the ministry's notion that many individuals had gained disability status through both a softening of the eligibility rules in 1996 and questionable assessor reports. A high number of these individuals, the ministry believed, would be found ineligible under the new rules.

In our opinion, the ministry did not sufficiently analyze whether its estimate of ineligible recipients was reliable before committing to the major initiative it undertook.

In our view, after the Act came into force, a well-designed statistical sample, of the 18,705 recipients whose eligibility could not be confirmed in the first phase assessed against the new requirements would have established the number of recipients who did not qualify for benefits. Such a sample would have shown that the risk of payments to ineligible clients was low, and that the ministry could therefore have taken a more gradual approach to reviewing recipients outside the sample.

With this simple step, the whole review process could have been less costly and probably less onerous for both the ministry and the recipients.

As it happens, the ministry subsequently used a similar approach when it dealt with a large number of mentally ill benefit recipients. Among the 18,705 clients who were asked for additional information, 5,629 had a primary diagnosis of mental illness. According to the ministry, after it had received and adjudicated 903 completed forms from these recipients—all confirming their eligibility status—it decided to exempt the remaining 4,726 individuals in the group from having to complete the form.

We also expected the ministry to have identified plausible alternative approaches to reassessing eligibility, and to have prepared a cost-benefit analysis for at least the top few options. We expected costs to include:

- direct costs of the initiative (e.g., salaries, contracted services);
- indirect costs (e.g., costs incurred by or transferred to other government programs and to non-government organizations); and
- non-financial considerations (e.g., impacts on program beneficiaries, service disruption).

Did the ministry adequately evaluate the timing and extent of the work needed to ensure that former disability benefit recipients met the eligibility criteria of the new Act?

On the benefits side, we expected to see analysis of items such as current and projected cost savings, and of non-financial considerations such as benefits to government and recipients, program efficiencies, and better evidence to support benefit payments. We also thought it reasonable to expect that the analysis would be clearly documented, as this would help justify actions taken and describe many of the critical elements needed to evaluate the results achieved (such as key assumptions, goals and objectives).

The ministry informed us that it considered six options to meet the Act requirements:

1. reviewing all recipients over a 60-day period,
2. reviewing all recipients in three two-month batches,
3. delaying the review for six months and then reviewing recipients in three two-month batches,
4. using a two-step process in which the recipient first submits a medical report and then, if additional information is needed, submits an assessor's report,
5. reviewing all recipients over a 3fi month timeframe, and
6. reviewing all recipients over a five-year timeframe.

According to the ministry, it chose option 5 because it felt that:

- it was important to ensure that a recipient met the new requirements in a timely manner, otherwise the Minister might be considered to be in contravention of the Act;
- this timeframe would cause less recipient anxiety than either a shorter or longer time period;
- doing all reviews at once rather than in batches or over a longer time frame was a more equitable approach; and
- the costs associated with assessing recipient eligibility would not have been materially different under another option because most of the costs were to pay for physicians, assessors and adjudicators and these would have been incurred regardless of the option chosen.

Did the ministry adequately evaluate the timing and extent of the work needed to ensure that former disability benefit recipients met the eligibility criteria of the new Act?

The ministry did not have an adequate analysis of the costs and benefits associated with each choice, or adequate evidence to support its reasons for choosing option 5. We believe that a significant factor in the ministry's choice was the potential cost savings associated with the anticipated number of ineligible recipients. And, if the ministry's assumptions were correct, it would realize those savings quickly.

Even as the review progressed, however, the ministry did not adequately reconsider its projections. For example, after the ministry confirmed the eligibility of 43,227 recipients from the information in its files and systems, a reasonable action would have been to assess whether rescinding eligibility status for a large number of the remaining 18,705 cases was really a likely result. If it was not, then the next reasonable action would have been to assess the prudence of continuing the fast-track review of the remaining files, knowing its costs and the potentially negative impacts it could have on the recipients. The ministry was unable to demonstrate that it made such assessments.

Did the ministry adequately manage the work it undertook, and did it use reasonable methods to assess the eligibility of individual recipients?

After deciding on its approach to assessing the eligibility of the former benefit recipients, we expected the ministry to have taken steps to ensure that its review was well managed. Specifically, we expected to find:

- a comprehensive plan for the review;
- adequate monitoring of the review's progress so that concerns could be identified and addressed promptly; and
- a reasonable process for consultation with external stakeholders about the review.

We also expected the ministry to have taken steps to ensure that it used reasonable and impartial methods to assess individual recipients, knowing their susceptibility to added stress.

We concluded that, having made its decision about how to carry out the review, the ministry did adequately manage the work and used reasonable and impartial methods to assess individual recipient eligibility. It also consulted effectively with other ministries and professional organizations but less so with advocacy groups.

Managing the work

The ministry prepared a comprehensive plan for the work it did to review the eligibility of recipients under the new Act

The ministry developed a detailed plan (project charter) for its eligibility review. The charter, approved by ministry executive, addressed several issues critical to carrying out an adequate review:

- purpose and objectives for the eligibility review project;
- background on why the project was being undertaken, including linking the initiative to the ministry's new vision and mission, the ministry budget targets through 2004/2005, the five-year outcomes identified by the Minister, and the new legislation;
- key stakeholders who needed to be consulted, including individuals within the ministry and government as well as those outside government;

- project scope, focusing on the business changes associated with the initiative;
- key deliverables and recommended approaches to their achievement, milestones, resources needed, critical success factors and assumptions, budget considerations, and responsibilities and sign-off requirements for key elements of the review;
- project organization, resources, roles and responsibilities; and
- project management considerations (e.g., communications and reporting, issues management and change control).

The ministry also prepared a business requirements plan, which identified all mandatory systems and business process changes required to support the new disability benefit designation; and a strategy for dealing with potential problems associated with doing the file review, including:

- errors occurring in categorization; and
- severely disabled clients being asked to undergo a full assessment.

In our view, the ministry's plan for the eligibility review helped ensure that the project was adequately managed and controlled.

The ministry adequately monitored the review

We found that the ministry adequately monitored the review to ensure that the project was proceeding according to the plan. Key elements of the project were assigned to individual ministry executive members and working teams, along with target completion dates. Team progress was regularly monitored against the plan and frequent meetings were held by the ministry executive to review the overall project status. Formal issues management and change control processes were employed during the project to identify, track and resolve issues and changes.

It was clear to us that the initiative was important to the ministry and had been closely monitored by the ministry executive.

The ministry's consultation process was effective with other ministries and professional organizations, but less so with advocacy groups

We found that the ministry was aware of the importance of consulting with key stakeholders and identified the important groups, including:

Ministries and authorities

- Ministry of Health Services
- Ministry of Children and Family Development
- Provincial Health Authorities

Professional organizations

- Medical community—British Columbia Medical Association
- College of Psychologists of BC
- Registered Nurses Association of British Columbia
- College of Registered Psychiatric Nurses of British Columbia
- College of Occupational Therapists of British Columbia
- College of Physical Therapists of British Columbia
- British Columbia Association of Social Workers

Advocacy Groups

- British Columbia Persons with AIDS
- Canadian Mental Health Association
- British Columbia Association for Community Living
- British Columbia Coalition for Persons with Disabilities
- British Columbia Brain Injury Associations
- British Columbia Paraplegic Association

The ministry predicated its consultation process on two key assumptions:

- a need to implement a new form and eligibility review procedures that were designed specifically to meet the new eligibility requirements; and
- a need to carry out the review quickly.

As a result, the ministry made it clear that it was open to stakeholder suggestions to improve the form and other aspects of the review process—but it had also already decided that the new form was the best way to collect the necessary information and that the review had to be completed over a relatively short timeframe.

While the consultation process worked adequately with affected ministries and professional organizations, it fared less well with advocacy groups. The ministry held several meetings with the latter to discuss the application form's development and the timing of the review. Two of the primary advocacy groups, the Canadian Mental Health Association and the British Columbia Coalition for Persons with Disabilities, felt that the ministry was not consulting in good faith because it had already made key commitments (i.e., to the timeframe and the 23-page form). In particular, the Coalition for People with Disabilities vigorously opposed both the changes to the former Disability Benefits Program Act and proposal for an eligibility review and ultimately dropped out of the process. The Canadian Mental Health Association concluded that it was better to stay involved to represent its clients even if it didn't completely agree with the ministry's approach to the review. The British Columbia Association for Community Living had limited involvement in the process because it determined that the review did not significantly affect its client group—that includes children, youth and adults with developmental disabilities.

Notwithstanding the problems the ministry encountered with advocacy group consultations, it acted on some of the groups' suggestions and amended the way the review was carried out.

Reasonableness of the review methods

The ministry used reasonable methods to assess individual recipient eligibility

The new Act requires the ministry to periodically check that individuals receiving disability benefits continue to satisfy the eligibility rules. We think that the citizens of British Columbia expect the ministry to take reasonable steps to ensure that eligibility checking is done fairly, respectfully and compassionately.

Did the ministry adequately manage the work it undertook, and did it use reasonable methods to assess the eligibility of individual recipients?

We found that the ministry, recognizing the inherent risks to recipients in the review, took a number of steps to ensure it used reasonable and impartial methods to meet its objectives. The ministry's key steps are described below.

Steps were taken to ensure reviews were done properly

As noted earlier in the report, the eligibility review had two phases—an internal review of client files to identify clients who, given their disability, met the new criteria and an assessment of new application forms from clients who did not have their status confirmed in the initial phase.

The ministry took steps to ensure that both phases of the review were done properly. It did this by:

- providing focused training to review staff;
- providing clear guidelines to review staff; and
- using appropriate quality control measures to ensure reviews were done reasonably and impartially.

The ministry was also careful not to tell reviewers that it was expecting to rescind disability status from a targeted number of recipients.

The most obvious disability cases had their status confirmed without having to provide additional information

As a result of the initial file reviews, 43,227 out of the 61,932 former disability recipients had their eligibility status confirmed without having to provide additional proof of their disability. The latter included clients with developmental disabilities, paraplegia, total blindness, profound deafness, double amputation, quadriplegia, Alzheimer's, ALS and similar conditions, muscular dystrophy, cystic fibrosis, severe mental disorders (e.g., schizophrenia, bipolar disorder), and wasting syndromes (e.g., AIDS).

The appropriateness of the 23-page form was tested

After confirming the eligibility status of the groups above, the ministry was left with 18,705 recipients whose file information was inadequate to assess whether they met the new criteria. To gather more information from these recipients, the ministry designed a new 23-page form (see Appendix C) to replace the previous 11-page form.

The new form includes:

- five pages of instructions—one aimed at the client, two at the client's physician and two at the client's health professional who assesses the client's impairments and their impact on performance of daily living activities;
- four pages for completion by the client or a representative;
- five pages for completion by the physician to confirm the medical condition;
- eight pages for completion by an assessor confirming that the client's medical condition affects his or her daily living; and
- one blank page.

Anticipating that a lengthy application form might cause some recipients stress, the ministry:

- made sure the form gathered the right eligibility information to conform to the new Act;
- designed the form with a respondent's ease of use in mind;
- had the form reviewed by a ministry review team and 22 external professionals;
- pilot tested the form with a group of physicians, health professionals and ministry adjudicators; and
- had an external advisor analyze the testing results.

Those involved in the review and testing of the form concluded that it was an appropriate tool for achieving the ministry's objectives. The evaluation group was generally positive about the form. It raised concerns about the form's length, but was unable to recommend how it could be simplified. In the end, the ministry decided to use the form as it was. From monitoring its use, the ministry has since determined that the form did provide

Did the ministry adequately manage the work it undertook, and did it use reasonable methods to assess the eligibility of individual recipients?

useful and complete information. However, it is planning to evaluate it further in the coming year.

Assistance was provided to recipients having difficulty with the process

Despite the ministry's efforts to avoid upsetting any recipients during the review, many individuals still experienced heightened levels of anxiety and problems. As the ministry monitored progress and identified recipient concerns, it responded with a number of initiatives, such as:

- calling clients who had not yet submitted their review form by January 23, 2003, to ask if they were having difficulties with it and to offer assistance (such as home visits);
- establishing outreach services through advocacy groups (e.g., Canadian Mental Health Association) for clients requiring assistance in completing the forms;
- providing two separate toll-free information lines to answer inquiries—one line for health professionals and the other for clients;
- publishing directories to assist clients with finding physicians and assessors in their communities;
- providing financial transportation assistance for clients who were unable to access physicians or assessors in their local communities and needed to travel to an adjacent community;
- establishing local clinics in Vancouver (in cooperation with Community Mental Health Services of the Vancouver Coastal Health Authority) to provide on-location assessors to assist clients with completing designation review forms; and
- extending the deadline for individuals whose review applications were delayed for circumstances beyond their control.

A new appeal process was provided

Clients told by the ministry that their benefits would be terminated were able to request a review by the ministry's reconsideration unit. That unit reviews a case and decides whether to let the original decision stand or to rule in favour of the client. If the original decision is upheld, the client then has the right to appeal to the Employment and Assistance Appeal Tribunal.

Established under the new Act, the tribunal is a quasi-judicial body that manages the final approval process for clients of the ministry who wish to appeal any reconsideration decision under the Employment and Assistance Act, the Employment and Assistance for Persons with Disabilities Act or the Child Care Subsidy Act. The tribunal consists of a Chair who reports to the Minister of Human Resources, a Vice-Chair, staff and a roster of independent panel members located throughout the province. Three people are chosen to hear each appeal.

Exhibit 2 shows the number of requests for reconsideration and number of appeals to the tribunal made between September 30, 2002, and September 30, 2003, by individuals whose eligibility was being terminated as a result of the review and by those first-time applicants who were turned down. In the majority of the cases in either situation, the original decision was upheld.

Exhibit 2

Number of requests for ministry reconsideration and number of appeals to the Employment and Assistance Appeal Tribunal, September 30, 2002, to September 30, 2003

	Disability Review		New Applications	
	No.	%	No.	%
Requests for ministry reconsideration				
Decision overturned	33	23	91	28
Decision upheld	113	77	229	72
Total	**146**	**100**	**320**	**100**
Appeal to tribunal				
Decision overturned	12	23	14	13
Decision upheld	40	77	88	84
Appeal withdrawn	-	-	3	3
Total	**52**	**100**	**105**	**100**

Source: Ministry of Human Resources

Transitional benefits were provided to clients whose disability status was rescinded

The ministry recognized that ending benefits for a client found by the review to be ineligible could create hardship. It therefore provided transitional assistance as follows:

- paying three months of benefits (from date of notification) to clients who submitted their forms by March 15, 2003, and were found to be ineligible;
- extending benefits until the end of July 2003 to clients who submitted forms after March 15, 2003, and were found ineligible; and
- paying benefits until June 15, 2003, to clients who did not return their forms.

Did the ministry achieve its review objectives?

An important part of project management is the evaluation phase. An evaluation properly carried out after completing a project allows management to report more accurately on its accomplishments. We expected the ministry to have:

- established—at the outset of the project—a framework for evaluating the review, including the specific objectives and how it planned to measure the extent to which they were achieved;
- evaluated the extent to which the review achieved its objectives;
- compared the costs and benefits of the review with estimates; and
- assessed how well initial assumptions about the eligibility of disability benefit recipients were supported by the results of the review.

The ministry has not yet evaluated the extent to which stated objectives and the costs and benefits of the project have been achieved. However, based on our own analysis, we concluded that the ministry had met the requirements of the Act by implementing a new application, adjudication and reconsideration process and by reviewing the existing disability benefit clients. It now has a higher level of assurance that only eligible clients are receiving assistance. The ministry, however, did not achieve the significant cost savings it expected, as only a small number of clients were found ineligible, which was much lower than had been estimated. Also, the review increased anxiety among disabled clients.

The ministry did not establish at the start of the project a complete framework for evaluating the results of the review

In examining ministry documents, we found parts of an evaluation framework for the eligibility review, but not a strategy comprehensive enough to allow the ministry to properly evaluate and report on the success of the initiative. For example, the project charter prepared at the end of May 2002 states that the goal for the project was two-fold:

- to implement, by September 1, 2002, a new persons with disabilities application, adjudication and reconsideration process; and
- to review existing disability benefit clients in relation to ongoing benefits under the new categories of service.

However, we believe that these are only two of the ministry's reasons for the initiative. As noted earlier in this report, we think that the ministry also expected many of the former recipients to have their disability status rescinded—estimates ranged from 6,177 to 9,750 clients. The savings from canceling eligibility were expected to help the ministry meet its budget targets for 2002/2003 through 2004/2005.

The ministry, however, did not establish early on how it planned to measure the extent to which the above objectives were achieved nor did it formally estimate the cost of carrying out the review. As a result, it lacked a firm framework through which it could compare and report on actual results.

The review helped the ministry meet the requirements of the new Act and increased assurance that only eligible clients receive assistance, however, it also increased anxiety among disabled clients

The ministry achieved its objectives of implementing a new application form for people with disabilities and new application adjudication and reconsideration processes. Doing this enabled the new Employment and Assistance for Persons with Disabilities Act to take effect on September 30, 2002, close to the planned date of September 1, 2002.

The ministry achieved its goal of reviewing the status of existing clients under the new eligibility rules, and so now has a higher level of assurance that only eligible clients receive assistance. At the same time, however, the review increased anxiety among disabled clients.

The ministry spent about $5 million for the review

The ministry has prepared a summary of costs of the review (Exhibit 3) which indicates that it spent about $5 million for the undertaking. This includes costs for:

- the file review to determine which clients met the new criteria for benefit eligibility and which needed to submit additional information;
- the adjudication process that focused on reviewing the new forms submitted for eligibility;
- the completion of forms by assessors and physicians; and

- the use of contracted services to provide assistance to clients and to perform other services, such as printing and mail services.

Almost 60% of the costs for the whole review—$2.8 million—were for assessor and physician fees.

The $5 million represents only those costs of the Ministry of Human Resources. The ministry has not estimated the costs that may have been incurred by other ministries and advocacy groups to help out clients during the review process.

The ministry projected that substantial savings would result from the review

In March 2002, the ministry included in its estimates savings of $104 million for the three fiscal years ending 2004/2005. These savings were to arise from:

- a reduction in new clients;
- cases moving from disability status to the "expected to work" and "temporarily excused" categories (includes rescinded designations);
- cases moving to employment; and
- changes in adjudication and work processes.

In October 2002, these estimates were reduced to $56 million. The reduction included an amount of $18 million for a fewer than expected number of cases moving to the "expected to work" and

Exhibit 3

Estimated expenditures incurred for the review

	Salaries and benefits ($)	Operations ($)	Total ($)
File review	416,000	1,000	417,000
Adjudication	1,269,000	25,000	1,294,000
Assessor and physician fees	–	2,777,000	2,777,000
Contracted services	–	381,000	381,000
Total	**1,685,000**	**3,184,000**	**4,869,000**

Source: Ministry of Human Resources

"temporarily excused," categories. As noted previously, estimates of the number of clients not meeting the new eligibility requirements varied from 6,177 to 9,750.

The results of the review are presented in Exhibit 4. As the figures show, the new eligibility requirements had very little effect on the eligibility of the existing clients. Of the total number of its 61,932 disabled clients, 60,775 (98.2%) either had their designations confirmed, or were exempted from the review. Of the 400 (0.6%) clients found ineligible, 46 had their cases closed, 40 reapplied and were granted disability status, and the remaining 314 clients began receiving other forms of government assistance.

Since the number of clients whose designations were rescinded as a result of the review was much lower then expected, the estimated savings were not achieved.

Exhibit 4

Results of the review, to August 11, 2003

		Clients	%
Total clients		61,932	100.0
Less: Clients confirmed eligible as a result of the ministry's internal review		43,227	69.8
Clients requested to fill out new form		18,705	
Less: Clients exempted after form sent out:			
Clients with mental illness	5,629		
Clients receiving medical services only	537	6,166	10.0
Total forms adjudicated after exemptions		12,539	
Results of the adjudication of forms submitted:			
Designation approved		11,382	18.4
Designation rescinded		400	0.6
Extensions granted		62	0.1
Cases closed, assistance no longer needed		695	1.1
			100.0
Total forms adjudicated after exemptions		12,539	

Source: Ministry of Human Resources

Response from the Ministry of Human Resources

Response from the Ministry of Human Resources

The Ministry of Human Resources appreciates the opportunity to respond to the Auditor General's report on the Audit of the Government's Review of Eligibility for Disability Assistance. The ministry welcomes constructive assessment of its activities and actions.

Under the Employment and Assistance and Employment and Assistance for Persons with Disabilities legislation, the ministry provides services to move people towards employment and assist individuals and families in need. In carrying out its mandate, the ministry is guided by the principles of personal responsibility, active participation, innovative partnerships, citizen confidence, fairness and transparency, clear outcomes, and accountability for results. It is these principles and the legislation that guided the ministry in its review of eligibility for disability assistance.

In undertaking its review of eligibility for disability assistance, the Ministry of Human Resources believes that the approach it developed was sensitive to clients and consistent with the ministry's principles and legislative requirements. The outcome of this review assures the public that disability assistance is provided only to eligible clients.

Review Time Frame:

The ministry agrees that balance must be achieved when designing a process to meet the objective of confirming client eligibility while minimizing client anxiety. The ministry believes that its designation review process, which began in early June 2002, and concluded 12 months later in June 2003, achieved the best possible balance and that the ministry did not move "…too quickly in fulfilling its responsibility."

In developing the designation review process, the ministry was concerned that if the review moved too slowly, the uncertainty associated with assessing eligibility would cause prolonged stress for clients. The ministry believes that taking a more gradual approach, beyond the 12 months of the review, would have unnecessarily increased and prolonged client anxiety.

Risk of Ineligibility and Options for Review:

The report finds that the ministry did not establish, "…that a significant risk existed of paying benefits to ineligible recipients." The Auditor General suggests that the ministry could have used a statistical sample to estimate the number of recipients who did not qualify.

It is important to recognize that the objective of the review was to ensure that persons with disabilities were reviewed fairly and impartially, ensuring that every person who received disability assistance was eligible. It is the ministry's view that the approach suggested by the Auditor General would have been equivalent to conducting the review in batches. This was one of the options the ministry rejected because it believed it was not equitable to have clients assessed in different timeframes.

In undertaking its review of eligibility for disability assistance, the ministry considered and evaluated six options noted in the report. The option selected, in the ministry's opinion, best balanced:

- *fair and equal treatment of new and existing clients;*
- *administrative fairness;*
- *compliance with the ministry's legislated mandate to determine individual eligibility;*
- *minimizing client anxiety; and*
- *a manageable process.*

It is these considerations which determined the ministry's course of action.

Cost Savings:

The Auditor General believes that a key ministry assumption was that, "...a large number of recipients would fail to qualify..." The report finds that as significant cost savings did not materialize from the review, the ministry failed to achieve its objective.

As noted earlier, the objective of the review was to ensure that persons with disabilities were reviewed fairly and impartially. While cost-savings were estimated as part of the ministry's budget planning, they were not the key consideration. The fact that there were no targets or quotas provided to adjudicators reinforces this position.

Managing the Review:

The ministry is pleased that the Auditor General notes, "Given the review it chose to carry out, the ministry did adequately manage the work and used reasonable methods to assess eligibility." The ministry appreciates the recognition of the extensive efforts by ministry staff to implement a sound designation review process.

The report states that nearly 62,000 clients had their eligibility individually confirmed through a fair and equitable process that met its guiding principles and key considerations. Out of nearly 62,000 clients, approximately 43,000 had their individual eligibility confirmed with little or no additional contact with the ministry. The remaining 18,705 were assessed through a process that the report describes as using, "...reasonable and impartial methods to assess individual recipient eligibility."

Client Anxiety:

The Auditor General is correct in highlighting that client anxiety was an issue needing attention. The ministry recognized that any process designed to assess individual eligibility, by its nature, would affect client anxiety. The impact of ministry actions on its clients was at the forefront during all planning discussions. As the report points out, the ministry:

- *provided focused training and clear guidelines to staff involved in the review;*
- *used appropriate quality control measures;*
- *rigorously tested and evaluated the assessment form with external stakeholders;*
- *called clients directly who were experiencing difficulty to offer assistance;*
- *provided two separate toll-free information lines;*
- *published directories to assist clients with finding physicians and assessors in their communities; and*
- *established outreach services for clients requiring assistance.*

The ministry worked closely with other ministries and authorities, professional organizations and some advocacy groups. The ministry acted on suggestions from advocacy groups and established outreach programs through partnering groups. Unfortunately, certain stakeholder groups opposed the review and dropped out of the process. The ministry believes the subsequent actions of some of these groups contributed to higher client anxiety.

The Auditor General also found that, "The ministry did not establish at the start of the project a complete framework for evaluating the results of the review." The ministry believes, however, that its evaluation framework was adequate given that the objective was to assess specific individual client eligibility over a defined timeframe. Given that approximately 62,000 clients had their eligibility assessed between June 2002 and June 2003, the ministry believes the public policy objective was met.

Conclusion:

The ministry thanks the Auditor General and his staff for their professionalism and diligence during the course of this audit. The ministry will incorporate into future practice the Auditor General's findings and comments in the Audit of the Governments Review of Eligibility for Disability Assistance. Through the audit process, specific actions have been identified that will enhance the ministry's ongoing operations. In looking forward, the ministry will continue to promote accountability, risk-based decision-making, economy and efficiency of operation and quality service to its clients.

Appendices

Notes:

- All rates are monthly.
- In addition to the support allowance, families receive $123.50 for each child to age 19 years, under the BC Family Bonus and ministry top-up if the Family Bonus is less than $123.50 or the child is ineligible for Family Bonus.
- For families with more than ten members, there is up to an additional $35 shelter assistance for each member beyond the seventh member. The support rate remains the same.
- Families of two or more that include someone on Old Age Security (OAS) are entitled to a maximum shelter rate for the family size.

Income Assistance Rates

	SUPPORT RATE							
UNIT SIZE	A	B	C	D	E	F	G	SHELTER MAXIMUM
1	$185.00	$282.92	N/A	$461.42	N/A	N/A	N/A	$325
2	307.22	452.06	325.58	630.56	$809.06	$555.08	$376.58	520
3	401.06	452.06	325.58	630.56	809.06	555.08	376.58	555
4	401.06	452.06	325.58	630.56	809.06	555.08	376.58	590
5	401.06	452.06	325.58	630.56	809.06	555.08	376.58	625
6	401.06	452.06	325.58	630.56	809.06	555.08	376.58	660
7	401.06	452.06	325.58	630.56	809.06	555.08	376.58	695

Note: Shelter increments continue to increase by an additional $35 for each additional dependant after unit size 7.

Note: Families with two or more children in receipt of full Family Bonus (FB) are eligible for an additional $1.25 for the second child and $1.67 for the third and subsequent children to take into account the NCB (National Child Benefit) indexing factor. These amounts are not included in the rate tables above.

Key **Effective April 1, 2002, rates for:**

A Employable singles, couples and two-parent families where all adults are under 65 years of age.

B Employable singles, couples and two-parent families where all adults meet the Persons with Persistent Multiple Barriers (PPMB) criteria.

C Employable one-parent families.

D Singles, couples and two-parent families where one adult is aged 65 years or older.

E Couples, and two-parent families where both adults are aged 65 years or older.

F One-parent families where the parent is aged 65 or older.

G One-parent families where the parent is a person who meets the Persons with Persistent Multiple Barriers (PPMB) criteria.

Disability Assistance Rates

UNIT SIZE	SUPPORT RATE A	B	C	D	SHELTER MAXIMUM
1	$461.42	N/A	N/A	N/A	$325
2	630.56	809.06	555.08	809.06	520
3	630.56	809.06	555.08	809.06	610
4	630.56	809.06	555.08	809.06	650
5	630.56	809.06	555.08	809.06	700
6	630.56	809.06	555.08	809.06	735
7	630.56	809.06	555.08	809.06	770

Note: Shelter increments continue to increase by an additional $35 for each additional dependant after unit size 7.

Note: Disability Assistance is paid in the month following designation. In cases where designation occurs prior to the individual's 18th birthday, payments begin in the month of the 18th birthday.

Note: Families with two or more children in receipt of full Family Bonus (FB) are eligible for an additional $1.25 for the second child and $1.67 for the third and subsequent children to take into account the NCB (National Child Benefit) indexing factor. These amounts are not included in the rate tables above.

Key **Effective August 1, 2000, rates for:**

A Singles, couples and two-parent families where one family member is eligible for Disability Assistance.

B Couples and two-parent families where both adults are eligible for Disability Assistance.

C One-parent families where the parent is eligible for Disability Assistance.

D Couples and two-parent families where one adult is aged 65 years or older but is not eligible for Disability Assistance and where one adult is eligible for Disability Assistance.

Child in the Home of Relative (CIHR) Rates

Age Group	Maximum Rate
Birth to 5 years	$257.46
6 to 9 years	$271.59
10 to 11 years	$314.31
12 to 13 years	$357.82
14 to 17 years	$402.70
18 years	$454.32

Appendix B: Persons with Persistent Multiple Barriers (PPMB)

Background

- The Employment and Assistance Act took effect as of September 30, 2002.
- Under this new legislation the disability level one (DB1) category has been discontinued and a new category of assistance called Persons with Persistent Multiple Barriers (PPMB) has been introduced.
- The PPMB category recognizes those individuals who are unable to achieve financial independence because of specific barriers to employment.

New Policy

- Persons with Persistent Multiple Barriers are those individuals who meet the following criteria:
  - Have received assistance for 12 of the last 15 months;
  - Have severe multiple personal barriers to employment; and
  - Have a medical condition (excluding addictions) that has lasted for at least one year, is likely to continue or reoccur frequently for at least 2 years and which seriously hinders their ability to search for, accept or continue employment;

  OR

  - Have a medical condition (excluding addictions) that has lasted for at least one year, is likely to continue or reoccur frequently for at least 2 years and which, by itself, precludes their ability to search for, accept or continue employment.
- An individual's personal barriers are those that:
  - Are beyond a person's control;
  - Cannot be overcome despite all reasonable steps by the client (excluding medical conditions); and
  - Directly prevent the person from maintaining employment now or in the foreseeable future.
- All adults (applicant and spouse) in a family unit must be persons with persistent multiple barriers to receive the PPMB support rate, medical and dental coverage, and to be eligible for the earnings exemption.
- Assistance for Persons with Persistent Multiple Barriers is not time-limited.

Types and rates of assistance

Family unit	Support Rate	Earnings Exemption	Medical Coverage	Dental Coverage	Time Limit Exemption
Single PPMB	$282.92	$300 flat rate	Enhanced*	$500 limit over 2 years	Yes
Single parent PPMB	$376.58	$300 flat rate	Enhanced* (parent and children)	$500 limit over 2 years ($700 annual limit for children)	Yes
Couple (both adults are PPMB)	$452.06	$300 flat rate	Enhanced*	$500 limit over 2 years (for each adult)	Yes
Couple without children (one adult is PPMB)	$307.22	No	Basic**	Emergency treatment only	PPMB adult only
Couple with children (one adult is PPMB)	$401.06	No	Basic** (Enhanced for children)	Emergency treatment only ($700 annual limit for children)	PPMB adult only
Couple with children (both adults are PPMB)	$452.06	$300 flat rate	Enhanced* (parents and children)	$500 limit over 2 years ($700 annual limit for children)	Yes

* Medical Services Plan, no deductible for Pharmacare, as well as other health assistance such as dental and optical coverage.

** Medical Services Plan, no deductible for Pharmacare, optical coverage, and emergency dental coverage.

The maximum shelter rates are the same as those for income assistance.

BRITISH COLUMBIA

Ministry of
Human Resources

PERSONS WITH DISABILITIES DESIGNATION APPLICATION

INTRODUCTION

The personal information requested on this form is collected under the authority of and will be used for the purpose of administering the *Employment and Assistance for Persons With Disabilities Act*. The collection, use and disclosure of personal information is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, use or disclosure of this information, please contact your local Employment and Assistance Centre.

The purpose of this form is to collect the information necessary to determine eligibility for the Person with Disabilities designation under the *Employment and Assistance for Persons with Disabilities Act*.

This Application has three Sections:

Section 1: **Applicant Information** (for completion by the Applicant) - The term "Applicant" used throughout the form means a client who is applying for the Person with Disabilities designation.

Section 2: **Physician Report** (for completion by the Applicant's Physician) - References to "Physician" in this application have the same meaning as "Medical Practitioner".

Section 3: **Assessor Report** (for completion by a health professional)

PLEASE DO NOT TAKE THIS BOOKLET FORM APART - PLEASE KEEP TOGETHER

Instructions for completion

1. The above sections of the Application Form need to be completed in the order listed.
2. The Applicant is to complete Section 1, Applicant Information, sign the Declaration, and take the form to his/her physician for completion of the Physician Report.
3. The Applicant's Physician is to complete Section 2, Physician Report, and return the Application Form to the Applicant.
4. The Applicant will then take the form to a Health Professional (as defined in Section 3) for completion of Section 3, Assessor Report.
5. The Health Professional is to complete Section 3, Assessor Report, and return the Application Form to the Applicant.
6. Applicant - please review the checklist at the end of this booklet to ensure your application is complete.
7. The Applicant will then mail the application to the Health Assistance Branch, Ministry of Human Resources using the enclosed self-addressed envelope.

Sample

Office Use Only

The following must be signed in order for the application to be processed

The Applicant is in receipt of Income Assistance or would qualify for assistance under the *Employment and Assistance for Persons With Disabilities Act* if found eligible for the Person with Disabilities (PWD) designation.

Ministry Signing Authority (Print Name)	Signature
Employment and Assistance Centre Stamp	Date Signed (YYYY MMM DD)

HR2683 (03/01/29)

Sample

BRITISH COLUMBIA
Ministry of Human Resources

DESIGNATION APPLICATION
SECTION 1
APPLICANT INFORMATION

You may have someone help you complete this Section of the Application.
Important Note: *You MUST sign the "Declaration" on page 5 of this form in order for your application to be processed.*

A - PERSONAL INFORMATION

Last Name	First Name	Middle Name	Date of Birth (YYYY MMM DD)

Personal Health Number	Social Insurance Number (optional)	Telephone Number

Street Address	City	Postal Code

Do you need help completing this application?
☐ Yes ☐ No If yes, what help do you need?

B - DISABLING CONDITION

This section provides you with an opportunity to describe your disability and the impact it has on your life. You are not required to complete this section. If you do not complete this Section, your application will be considered based on information provided in the Physician and Assessor Sections of this Application.

☐ **I choose not to complete this self-report.** (Please proceed to Declaration on page 5)

Note - If more space is required, you may attach additional pages.

1. Please describe your disability.

Sample

B - DISABLING CONDITION (cont'd)

2. How does your disability affect your life and your ability to take care of yourself?

Sample

B - DISABLING CONDITION (cont'd)

C - DECLARATION AND NOTIFICATION

I, _____, am applying for designation as a person with disabilities as set out in the *Employment and Assistance for Persons with Disabilities Act* and I declare that the information provided in Section 1A and 1B is true and complete. I understand that I will have the opportunity to review completed Section 2, Physician Report and Section 3, Assessor Report before submitting the completed designation application form to the Ministry of Human Resources. I understand that the BC government may verify the information in Section 1A, Section 2 and Section 3, as necessary to determine and confirm my eligibility for the designation.

*Applicant Signature

Witness Signature

Date Signed (YYYY MMM DD)

Witness Name (Please Print)

Witness Address & Telephone

Sample

* If the Applicant is incapable of signing this Application, it may be signed by a person who has legal authority to act on behalf of the Applicant as applicable under provisions of relevant BC legislation, for example, a committee, or a person with an enduring power of attorney. If you are signing on behalf of the Applicant, you must state your legal authority to act on behalf of the Applicant and you must attach proof of that legal authority (for example, a copy of the court order naming you as Committee) to this Application.

My legal authority to act for the applicant is _____.

NOTE: Proof of Committee, Power of Attorney and/or Parent/Guardian status must accompany this Application.

BRITISH COLUMBIA

Ministry of
Human Resources

PERSONS WITH DISABILITIES DESIGNATION APPLICATION
SECTION 2
PHYSICIAN REPORT

The personal information requested on this form is collected under the authority of and will be used for the purpose of administering the *Employment and Assistance for Persons With Disabilities Act*. The collection, use and disclosure of personal information is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, use or disclosure of this information, please contact your local Employment and Assistance Centre.

This section is to be filled out by a physician registered and licensed to practice in British Columbia. The Physician completing this Section of the application **may** also complete Section 3, Assessor Report.

The purpose of the Physician Report is to provide information to the ministry about the applicant's physical or mental impairments associated with diagnosed medical conditions relevant to this application for a ***Person with Disabilities (PWD)*** designation. The emphasis is on how the medical conditions and impairment affect the Applicant's ability to perform Daily Living Activities as defined in the *Regulations* pursuant to the *Employment and Assistance for Persons with Disabilities Act*. This Application is **not** intended to assess employability or vocational abilities.

Please answer all questions completely as this will assist the Ministry of Human Resources, Health Assistance Branch, in determining whether the Applicant meets the criteria for designation as a person with disabilities.

The contents of this report are confidential, but are subject to the following conditions:

- the report will be shared with the applicant;
- the report will be shared with the Health Professional completing Section 3 of this Application;
- the report will be shared with the Employment and Assistance Appeal Tribunal if an appeal is initiated regarding eligibility for the Person with Disabilities (PWD) designation; and
- the report may be reviewed by a health professional consulting with the Ministry of Human Resources.

Sample

Fee

Payment of fees for completion of the Physician Report is provided through the Medical Services Plan. Payment will be made in accordance with the rate established by the Ministry of Human Resources provided that:

1. The Application process has been initiated by the Ministry of Human Resources Employment and Assistance Centre as indicated by the Office stamp and signature on the cover page of this Application; and
2. The Physician has fully completed Section 2 of the Application.

Please keep a copy of the completed Section 2 of this form until such time as you receive payment for your fee.

Physicians having questions regarding this application may contact the Health Assistance Branch, Ministry of Human Resources at 1-888-356-6564

PROGRAM DEFINITIONS

Designation of Persons with Disabilities (PWD)

Following is an extract of the section in the *Employment and Assistance for Persons With Disabilities Act* that sets out the criteria for designation as a person with disabilities.

2(1) In this section:

"assistive device" means a device designed to enable a person to perform a daily living activity that, because of a severe mental or physical impairment, the person is unable to perform;

"daily living activity" has the prescribed meaning;

"health professional" means a person who is authorized under an enactment to practice the profession of:

(a) a medical practitioner,
(b) a registered psychologist,
(c) a registered nurse or registered psychiatric nurse,
(d) an occupational therapist,
(e) a physical therapist, or
(f) a social worker

2(2) The minister may designate a person who has reached 18 years of age as a person with disabilities for the purposes of this ACT if the minister is satisfied that the person has a severe mental or physical IMPAIRMENT that

(a) in the opinion of a medical practitioner is likely to continue for at least 2 years, and

(b) in the opinion of a health professional

(i) directly and significantly restricts the person's ability to perform DAILY LIVING ACTIVITIES either

(A) continuously, or

(B) periodically for extended periods, and

(ii) as a result of those restrictions, the person requires help to perform those activities.

2(3) For the purposes of subsection (2),

(a) a person who has a severe mental impairment includes a person with a mental disorder, and

(b) a person requires help in relation to a daily living activity if, in order to perform it, the person requires

(i) an assistive device,

(ii) the significant help or supervision of another person, or

(iii) the services of an assistance animal.

2(4) The minister may rescind a designation under subsection (2).

Sample

TO BE COMPLETED BY THE APPLICANT'S PHYSICIAN ONLY

A - DIAGNOSES

Specify diagnoses related to the Applicant's impairment using the diagnostic codes below.
"Impairment" is a loss or abnormality of psychological, anatomical or physiological structure or function causing a restriction in the ability to function independently, effectively, appropriately or for a reasonable duration. **Please include additional information as required.**

	Diagnostic Code	Specific Diagnosis (e.g. location of paralysis, type of respiratory or heart condition, type of hepatitis, etc.)	Date of onset, If known	
			Month	Year
1.				
2.				
3.				
4.				
5.				

Comments:

Sample

DIAGNOSTIC CODES

Infectious and parasitic diseases
1.0 Other
1.1 HIV
1.2 AIDS
1.3 Hepatitis
1.4 Hepatitis C

Neoplasms
2.0 Neoplastic disorders - other
2.1 Lip, oral cavity & pharynx
2.2 Digestive organs & peritoneum
2.3 Respiratory & intrathoracic organs
2.4 Bone, connective tissue, skin and breast
2.5 Genitourinary organs
2.6 Leukemia

Endocrine, nutritional and metabolic diseases, and immunity disorders
3.0 Endocrine disorders - other
3.01 Immune disorders - other
3.02 Metabolic disorders - other
3.1 Thyroid disorders
3.2 Diabetes

Diseases of the blood and blood-forming organs
4.0 Other diseases of the blood
4.1 Anemia
4.2 Hemophillia

Mental disorders
5.0 Other mental (please specify)
5.1 Delirium, dementia & amnestic & other cognitive disorders
5.2 Schizophrenia & other Psychotic disorders
5.3 Mood disorders
5.4 Developmental disability
5.5 Anxiety disorders
5.6 Somatoform disorders
5.7 Personality disorders
5.8 Substance-related disorders
5.9 Pervasive developmental disorders
5.10 Eating disorders

Diseases of the nervous system & sense organs - Neurological
6.0 Neurological disorders - other
6.1 Epilepsy
6.3 Brain tumors
6.4 Parkinson's disease
6.5 Cerebral palsy
6.6 Paraplegia
6.7 Quadraplegia
6.9 Other paralysis
6.10 Myasthenia Gravis
6.11 Muscular dystrophy
6.12 ALS
6.13 Alzheimer's disease
6.14 Huntington's Chorea
6.15 Friedreich's Ataxia
6.16 Multiple sclerosis

Conditions of the nervous system & sense organs - Sensory
7.00 Sensory disorders - other
7.01 Blindness
7.02 Visually impaired
7.03 Deafness
7.04 Hearing impaired
7.05 Organic speech loss

Diseases of the circulatory system
8.0 Cardiovascular - other
8.1 Ischemic heart disease
8.2 Recurrent Arrhythmias
8.3 Valvular heart disease
8.4 Congenital heart disease
8.5 Cardiomyopathy
8.6 Chronic venous insufficiency
8.7 Peripheral arterial disease
8.8 Cerebral vascular accident

Diseases of the respiratory system
9.0 Respiratory disorders - other
9.1 Cystic fibrosis
9.2 COPD
9.3 Asthma
9.4 Emphysemia

Diseases of the digestive system
10.0 Digestive disorders - other
10.1 Peptic ulcer
10.2 Chronic liver disease
10.3 Cirrhosis
10.4 Crohn's disease
10.5 Colitis

Diseases of the genitourinary system
11.0 Genitourinary disorders - other
11.1 Kidney disease

Diseases of the skin and subcutaneous tissue
12.0 Skin disorders - other
12.1 Psoriasis

Diseases of the musculoskeletal system and connective tissue
13.0 Musculoskeletal system - other
13.1 Lupus
13.2 Rheumatoid arthritis
13.3 Arthritis
13.4 Osteoporosis
13.5 Ankylosing spondolitis
13.6 Degenerative disc disease
13.7 Scoliosis
13.8 Fibromyalgia
13.9 Scleroderma

Congenital anomalies
14.0 Congenital anomalies - other
14.1 Chromosomal abnormalities
14.2 Fetal alcohol syndrome
14.3 Thaldomide syndrome
14.4 Spina Bifida

Injury and poisoning
15.0 Injury and poisoning - other
15.1 Traumatic brain injury
15.2 Amputations

Other conditions
16.0 Other
16.1 Chronic fatigue syndrome
16.2 Sleep apnea
16.3 Environmental sensitivities

B - HEALTH HISTORY

1. Please indicate the severity of the medical conditions relevant to this person's impairment. How does the medical condition impair this person? Test results and other reports or findings may be used here where appropriate.

Sample

2. Height and Weight *(if relevant to the impairment)*

Height: Weight:

3. Has the applicant been prescribed any medication and/or treatments that interfere with his/her ability to perform daily living activities? ☐ Yes ☐ No

If yes, please explain:

If yes, what is the anticipated duration of the medications/treatments:

4. Does the applicant require any prostheses or aids for his/her impairment? ☐ Yes ☐ No

If yes, please explain:

C - DEGREE AND COURSE OF IMPAIRMENT

1. Is the impairment likely to continue for two years or more from today? ☐ Yes ☐ No
   What is the estimated duration of the impairment and are there remedial treatments that may resolve or minimize the impairment?

Please explain:

D - FUNCTIONAL SKILLS

Note: For the purposes of questions #1 and #2, "unaided" means without the assistance of another person, assistive device or assistance animal

1. How far can this person **walk** unaided on a flat surface?
   ☐ 4+ blocks ☐ 1 to 2 blocks ☐ Unknown
   ☐ 2 to 4 blocks ☐ Less than 1 block ☐ Not at all

2. How many **stairs** can this person climb unaided?
   ☐ 5+ steps ☐ 2 to 5 steps ☐ None ☐ Unknown

3. What are the person's limitations in **lifting**?
   ☐ No limitations ☐ 2 to 7 kg (5 to 15 lbs) ☐ No lifting
   ☐ 7 to 16 kg (15 to 35 lbs) ☐ Under 2 kg (Under 5 lbs) ☐ Unknown

4. How long can this person remain **seated**?
   ☐ No limitation ☐ 1 to 2 hours ☐ Unknown
   ☐ 2 to 3 hours ☐ Less than 1 hour

5. Are there difficulties with **communication** other than a lack of fluency in English? ☐ Yes ☐ No
   If yes, what is the cause: ☐ Cognitive ☐ Motor ☐ Sensory ☐ Other

Comments:

6. Are there any significant deficits with **cognitive and emotional function?** ☐ Yes ☐ No ☐ Unknown
   If yes, check those areas where the deficits are evident and provide details below:
   - ☐ Consciousness *(orientation, confusion)*
   - ☐ Executive *(planning, organizing, sequencing, calculations, judgement)*
   - ☐ Language *(oral, auditory, written comprehension or expression)*
   - ☐ Memory *(ability to learn and recall information)*
   - ☐ Perceptual psychomotor *(visual spatial)*
   - ☐ Psychotic symptoms *(delusions, hallucinations, thought disorders)*
   - ☐ Emotional disturbance *(e.g. depression, anxiety)*
   - ☐ Motivation *(loss of initiative or interest)*
   - ☐ Impulse control
   - ☐ Motor activity *(goal oriented activity, agitation, repetitive behaviour)*
   - ☐ Attention or sustained concentration
   - ☐ Other *(specify)*

Comments:

Sample

E - DAILY LIVING ACTIVITIES

Note: If you are completing the Assessor Report, Section 3, in addition to this Physician Report, do not complete this page. (Part E)

Does the impairment directly restrict the person's ability to perform Daily Living Activities?

☐ Yes ☐ No ☐ Unknown

If yes, please complete the following table:

Daily Living Activities	*Is Activity Restricted? (check one) If yes, describe extent of restriction in "comments" below*			If yes, the restriction is (check one)	
	Yes	No	Unknown	Continuous[1]	Periodic*[2]
Personal self care	☐	☐	☐	☐	☐
Meal preparation	☐	☐	☐	☐	☐
Management of medications	☐	☐	☐	☐	☐
Basic housework	☐	☐	☐	☐	☐
Daily shopping	☐	☐	☐	☐	☐
Mobility inside the home	☐	☐	☐	☐	☐
Mobility outside the home	☐	☐	☐	☐	☐
Use of transportation	☐	☐	☐	☐	☐
Management of finances	☐	☐	☐	☐	☐
Social functioning** - daily decision making; interacting, relating and communicating with others *(this category only applies for persons with an identified mental impairment or brain injury).* **If yes, please provide details**	☐	☐	☐	☐	☐

Sample

* If "Periodic", please explain:

** If Social Functioning is impacted, please explain:

Please provide additional comments regarding the degree of restriction:

What assistance does your patient need with Daily Living Activities? *("Assistance" includes help from another person, equipment and assistance animals.)* Please be specific regarding the nature and extent of assistance required.

[1] **Continuous assistance** - refers to needing significant help most or all of the time for an activity.

[2] **Periodic assistance** - refers to the need for significant help for an activity some of the time as would be the case where a person required help due to the episodic nature of the impairment.

F - ADDITIONAL COMMENTS

Please provide any additional information that you consider relevant to an understanding of the significance of the person's medical condition, the nature and extent of this person's impairment and the impact these have on his/her daily functioning. *(e.g., hospitalization related to the impairment.)*

G - FREQUENCY OF CONTACT

How long has the Applicant been your patient?

Prior to today, how often have you seen the Applicant in the past 12 months?

☐ 0 ☐ Once ☐ 2 - 10 ☐ 11 or more

Comments:

H - CERTIFICATION

I, _____, am a physician registered with the College of Physicians and Surgeons of British Columbia and licensed to practice clinical medicine in BC.

☐ I am a General Practitioner

☐ I am a specialist in _____

Medical Practitioner Number: _____

This report (and attached documents) contains my findings and considered opinion at this time.

Signature	Date (YYYY MM/M DD)	Telephone
Fax	E-mail Address (optional)	

Print / Stamp Address

Sample

BRITISH COLUMBIA

Ministry of
Human Resources

PERSONS WITH DISABILITIES
DESIGNATION APPLICATION
SECTION 3
ASSESSOR REPORT

The personal information requested on this form is collected under the authority of and will be used for the purpose of administering the *Employment and Assistance for Persons With Disabilities Act*. The collection, use and disclosure of personal information is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, use or disclosure of this information, please contact your local Employment and Assistance Centre.

This Assessor Report is to be completed by one of the following health professionals: Medical Practitioner, Registered Psychologist, Registered Nurse or Registered Psychiatric Nurse, Occupational Therapist, Physical Therapist or Social Worker.

The purpose of the Assessor Report is to document the Applicant's impairments and their impact on performance of Daily Living Activities as defined in the *Regulations* pursuant to the *Employment and Assistance for Persons With Disabilities Act*. The Application is **not** intended to assess employability or vocational abilities.

This section should be completed by a health professional having a history of contact and recent experience with the applicant. **Please complete this section based on your knowledge of the Applicant, observations, clinical data and experience.**

Please answer all questions completely as this will assist the Ministry of Human Resources, Health Assistance Branch, in determining whether the applicant meets the criteria for designation as a person with disabilities.

The contents of this report are confidential, but are subject to the following understandings:

- the report will be shared with the applicant;
- the report may be shared with the Physician completing Section 2 of this application;
- the report will be shared with the Employment and Assistance Appeal Tribunal if an appeal is initiated regarding eligibility for the Persons with Disabilities (PWD) designation; and
- the report may be reviewed by a health professional consulting with the Ministry of Human Resources.

Fee :

Payment will be made in accordance with the rate established by the Ministry of Human Resources provided that:

1. The Application process has been initiated by the Ministry of Human Resources Employment and Assistance Centre as indicated by the Office stamp and signature on the cover page of this Application; and
2. The Health Professional has fully completed Section 3 of the Application.

Fees for physicians completing this section are paid through the Medical Services Plan. Other Health Professionals completing this section may submit an invoice in the amount of $75 to the Ministry of Human Resources at the following address (please use tear-off invoice on page 23):

Ministry of Human Resources
Health Assistance Branch
PO Box 9971 Stn Prov Govt
Victoria, B.C. V8W 9R5

Please keep a copy of the fully completed Section 3 of this form until such time as you receive payment for your fee.

Assessors having questions regarding this application may contact the Health Assistance Branch, Ministry of Human Resources at 1-888-356-6564

PROGRAM DEFINITIONS

Designation of Persons with Disabilities (PWD)

Following is an extract of the section in the *Employment and Assistance for Persons With Disabilities Act* that sets out the criteria for designation as a person with disabilities.

2(1) In this section:

"assistive device" means a device designed to enable a person to perform a daily living activity that, because of a severe mental or physical impairment, the person is unable to perform;

"daily living activity" has the prescribed meaning;

"health professional" means a person who is authorized under an enactment to practice the profession of:

(a) a medical practitioner,
(b) a registered psychologist,
(c) a registered nurse or registered psychiatric nurse,
(d) an occupational therapist,
(e) a physical therapist, or
(f) a social worker.

2(2) The minister may designate a person who has reached 18 years of age as a person with disabilities for the purposes of this ACT if the minister is satisfied that the person has a severe mental or physical IMPAIRMENT that

(a) in the opinion of a medical practitioner is likely to continue for at least 2 years, and

(b) in the opinion of a health professional

(i) directly and significantly restricts the person's ability to perform DAILY LIVING ACTIVITIES either
(A) continuously, or
(B) periodically for extended periods, and

(ii) as a result of those restrictions, the person requires help to perform those activities.

2(3) For the purposes of subsection (2),

(a) a person who has a severe mental impairment includes a person with a mental disorder, and

(b) a person requires help in relation to a daily living activity if, in order to perform it, the person requires

(i) an assistive device,
(ii) the significant help or supervision of another person, or
(iii) the services of an assistance animal.

2(4) The minister may rescind a designation under subsection (2).

Sample

A -LIVING ENVIRONMENT

1. Does the Applicant live ☐ Alone? ☐ With Family, Friends, or Caregiver? ☐ In a Care Facility?

Comment:

B - MENTAL OR PHYSICAL IMPAIRMENT

"Impairment" is a loss or abnormality of psychological, anatomical or physiological structure or functioning causing a restriction in the ability to function independently, effectively, appropriately or for a reasonable duration.

1. **What are the applicant's mental or physical impairments that impact his/her ability to manage Daily Living activities?** ***(brief summary)***

2. **Ability to Communicate**

Please indicate the level of ability in the following areas:

	Good	Satisfactory	Poor	Unable	Explain / Describe
Speaking					
Reading					
Writing					
Hearing					

Comments:

3. **Mobility and Physical Ability**

Indicate the assistance required related to impairment(s) that directly restrict the applicant's ability to manage in the following areas. Check all that apply.

	Independent	Periodic assistance [1] from another person	Continuous assistance [2] from another person or unable	Uses Assistive device	Takes significantly longer than typical (describe how much longer)	Explain and specify assistive device/s
Walking indoors						
Walking outdoors						
Climbing stairs						
Standing						
Lifting						
Carrying and holding						

Comments:

[1] **Periodic assistance** - refers to the need for significant help for an activity some of the time as would be the case where a person required help due to the episodic nature of the impairment.

[2] **Continuous assistance** - refers to needing significant help most or all of the time for an activity.

Sample

B - MENTAL OR PHYSICAL IMPAIRMENT (cont'd)

Complete item #4 for an Applicant with an identified mental impairment or brain injury.

4. Cognitive and Emotional Functioning

For each item indicate to what degree the applicant's mental impairment or brain injury restricts or impacts his/her functioning.

If impact is episodic or impact varies over time, please explain in the comment section below.	***Impact on Daily Functioning***			
	No impact	**Minimal impact**	**Moderate impact**	**Major impact**
Bodily functions *(e.g., eating problems, toileting problems, poor hygiene, sleep disturbance)*	☐	☐	☐	☐
Consciousness *(e.g., orientation, alert/drowsy, confusion)*	☐	☐	☐	☐
Emotion *(e.g., excessive or inappropriate anxiety, depression, etc.)*	☐	☐	☐	☐
Impulse control *(e.g., inability to stop doing something or failing to resist doing something)*	☐	☐	☐	☐
Insight and judgement *(e.g., poor awareness of self and health condition(s), grandiosity, unsafe behaviour)*	☐	☐	☐	☐
Attention/concentration *(e.g., distractible, unable to maintain concentration, poor short term memory)*	☐	☐	☐	☐
Executive *(e.g., planning, organizing, sequencing, abstract thinking, problem-solving, calculations)*	☐	☐	☐	☐
Memory *(e.g., can learn new information, names etc. and then recall that information; forgets over-learned facts)*	☐	☐	☐	☐
Motivation *(e.g., lack of initiative, loss of interest)*	☐	☐	☐	☐
Motor activity *(e.g., increased or decreased goal-oriented activity, co-ordination, lack of movement, agitation, ritualistic or repetitive actions, bizarre behaviours, extreme tension)*	☐	☐	☐	☐
Language *(e.g., expression or comprehension problems - e.g. inability to understand, extreme stuttering, mute, racing speech, disorganization of speech)*	☐	☐	☐	☐
Psychotic symptoms *(e.g., delusions, hallucinations, disorganized thinking, etc.)*	☐	☐	☐	☐
Other neuropsychological problems *(e.g., visual/spatial problems, psychomotor problems, learning disabilities, etc.)*	☐	☐	☐	☐
Other emotional or mental problems *(e.g., hostility, explain below)*	☐	☐	☐	☐

Comments:

Sample

C - DAILY LIVING ACTIVITIES

Indicate the assistance required related to impairment(s) that directly restrict the applicant's ability to manage in the following areas. Check all that apply.	Independent	Periodic assistance [3] from another person	Continuous assistance [4] from another person or unable	Uses Assistive device (Explain)	Takes significantly longer than typical (describe how much longer)	Explain / Describe
Personal Care						
1. Dressing						
2. Grooming						
3. Bathing						
4. Toileting						
5. Feeding self						
6. Regulate diet [5]						
7. Transfers (in/out of bed)						
8. Transfers (on/off of chair)						
Basic Housekeeping						
1. Laundry						
2. Basic Housekeeping						
Shopping						
1. Going to and from stores						
2. Reading prices and labels						
3. Making appropriate choices						
4. Paying for purchases						
5. Carrying purchases home						

Additional comments *(including a description of the type and amount of assistance required and identification of any safety issues):*

Sample

[3] **Periodic assistance** - refers to the need for significant help for an activity some of the time as would be the case where a person required help due to the episodic nature of the impairment.

[4] **Continuous assistance** - refers to needing significant help most or all of the time for an activity.

[5] For example, issues related to eating disorders characterized by major disturbances in eating behaviour.

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ASSESSOR

C - DAILY LIVING ACTIVITIES (cont'd)

Indicate the assistance required related to impairment(s) that directly restrict the applicant's ability to manage in the following areas. Check all that apply.	Independent	Periodic assistance from another person	Continuous assistance from another person or unable	Uses Assistive device (Explain)	Takes significantly longer than typical (describe how much longer)	Explain / Describe
Meals						
1. Meal planning						
2. Food preparation						
3. Cooking						
4. Safe storage of food (ability, not environmental circumstances)						
Pay Rent and Bills						
1. Banking						
2. Budgeting						
3. Pay rent and bills						
Medications						
1. Filling/Refilling prescriptions						
2. Taking as directed						
3. Safe handling and storage						
Transportation						
1. Getting in and out of a vehicle						
2. Using public transit *(where available)*						
3. Using transit schedules and arranging transportation						

Additional comments *(including a description of the type and amount of assistance required and identification of any safety issues)*:

Sample

C - DAILY LIVING ACTIVITIES (cont'd)

Social Functioning Only complete this if the Applicant has an identified mental impairment, including brain injury.

Indicate the support/supervision required, as related to restrictions in the following areas:	Independent	Periodic Support/Supervision	Continuous Support/Supervision	Explain / Describe (include a description of the degree and duration of support/supervision required)
Appropriate social decisions (incl. avoiding situations dangerous to self or others, good social judgement)				
Able to develop and maintain relationships				
Interacts appropriately with others (e.g., understands and responds to social cues;problem solves in social context)				
Able to deal appropriately with unexpected demands				
Able to secure assistance from others				
Other (specify) _____				

Describe how the mental impairment impacts the applicant's relationship with his/her:

- **immediate social network (partner, family, friends)**

☐ good functioning - positive relationships: assertively contributes to these relationships

☐ marginal functioning - little significant participation/communication: relationships often minimal and fluctuate in quality

☐ very disrupted functioning - aggression or abuse: major withdrawn: often rejected by others

Comments:

- **extended social networks (neighbourhood contacts, acquaintances, storekeepers, public officials, etc.)**

☐ good functioning - positive interacts in community: often participates in activities with others

☐ marginal functioning - little more than minimal acts to fulfill basic needs

☐ very disrupted functioning - overly disruptive behaviour: major social isolation

Comments:

If the applicant requires help, as indicated above, please describe the support/supervision required which would help to maintain him/her in the community.

Additional Comments *(including identification of any safety issues)*:

Sample

D - ASSISTANCE PROVIDED FOR APPLICANT

Assistance provided by other people

The help required for daily living activities is provided by:

- ☐ Family
- ☐ Friends
- ☐ Health Authority Professionals (e.g., Nurse)
- ☐ Volunteers
- ☐ Community Service Agencies
- ☐ Other

Comments:

If help is required but there is none available, please describe what assistance would be necessary:

Assistance provided through the use of Assistive Devices

What equipment or devices does the Applicant routinely use to help compensate for his/her impairment?

Check (✓) appropriate item(s):

- ☐ **Cane**
- ☐ **Crutches**
- ☐ **Walker**
- ☐ **Manual Wheelchair**
- ☐ **Power Wheelchair**
- ☐ **Scooter**
- ☐ **Lifting device**
- ☐ **Hospital bed**
- ☐ **Prosthesis**
- ☐ **Splints**
- ☐ **Braces**
- ☐ **Feeding device**
- ☐ **Breathing device**
- ☐ **Commode**
- ☐ **Urological appliance**
- ☐ **Ostomy appliance**
- ☐ **Communication devices**
- ☐ **Interpretive services**
- ☐ **Toileting aids**
- ☐ **Bathing aids**
- ☐ **Other**
- ☐ **Specially designed adaptive housing**

Please provide details on any equipment or devices used by the applicant:

If equipment is required but is not currently being used, please describe the equipment or device that is needed:

Assistance provided by Assistance Animals

Does the applicant have an Assistance Animal? ☐ Yes ☐ No

If yes, please specify either the nature of the assistance provided by the animal or the need:

Sample

ASSESSOR

E - ADDITIONAL INFORMATION

Please provide any additional information that may be relevant to understanding the nature and extent of the applicant's impairment and its effect on daily living activities.

Sample

F - APPROACHES AND INFORMATION SOURCES

What approaches and information sources did you use to complete this form:

- ☐ office interview with applicant
- ☐ home assessment
- ☐ other assessments (specify) _____
- ☐ file/chart information (specify) _____
- ☐ family/friends/caregivers (specify) _____
- ☐ other professionals (specify) _____
- ☐ community services (specify) _____
- ☐ other (specify) _____

G - FREQUENCY OF CONTACT

1. Is this your first contact with the applicant? ☐ Yes ☐ No

2. How long have you known this applicant? _____

3. How often have you seen this person in the last year?
   ☐ Once ☐ 2 - 10 times ☐ 11 or more times

4. Briefly describe the type and duration of the program or services you or your organization are providing or have provided to the applicant.

H - CERTIFICATION

I, _____ am a _____ practicing in Bri sh Columbia.
(enter professional discipline)

I am registered with a professional regulatory body. ☐ Yes ☐ No

Name of regulatory body: _____

My registration number is: _____

I am employed by:

☐ self-employed: private practice ☐ A Health Authority

☐ Other employer (please specify) _____

This report *(and attached documents)* contains my findings and considered opinion at this time.

Signature	Date (YYYY MMM DD)	Telephone

Fax	E-mail Address (optional)

Print / Stamp Address

Sample

ASSESSOR

CHECKLIST ☑	APPLICANT CHECKLIST
☐	Have you completed Section 1, Applicant Information?
☐	Have you read and signed the declaration, Section 1C?
☐	Has the Physician Report, Section 2, been completed and signed?
☐	Has the Assessor Report, Section 3, been completed and signed?
☐	Did you keep a photocopy for your records?
☐	Did you remember to include any additional information you want considered?
☐	Has proof of legal authority to act on behalf of the applicant been attached?

☐ **Do you wish to be notified when your application is received by Health Assistance Branch?**
If so, please check here and complete the form below

☐ Using the enclosed self-addressed envelope, please mail your completed application to:

Health Assistance Branch
Ministry of Human Resources
PO Box 9999 Stn Prov Govt
Victoria, B.C. V8W 9W9

CONFIRMATION OF APPLICATION RECEIVED BY HEALTH ASSISTANCE BRANCH

Your Application was received on:

Name
Address
City/Town
Postal Code

Sample

HR2883 (03/12/9)

ASSESSOR'S INVOICE

Invoice No. Invoice Date

Applicant Name Applicant DOB Personal Health Number

Date of Service *Completion of PWD Assessors Section* *$75.00*
Description of Service

Make cheque payable to:

Supplier Name

Address Postal Code Telephone

Supplier Signature

Sample

Ministry of Human Resources
Health Assistance Branch
P.O. Box 9971 Stn Prov Govt
Victoria, B.C. V8W 9R5

Appendix D: Office of the Auditor General: Risk Auditing Objectives and Methodology

The Office has three lines of business:

- Attesting to the reliability of government financial statements;
- Assessing the quality of government service plan reports;
- Examining how government manages its key risks.

Each of these lines of business have certain objectives that are expected to be achieved, and each employs a particular methodology to reach those objectives. The following is a brief outline of the objectives and methodology applied by the Office for assessing the management of risk within government programs and services, that is, risk auditing.

Risk Auditing

What are Risk Audits?

Risk audits (also known as performance or value-for-money audits) examine whether money is being spent wisely by government—whether value is received for the money spent. Specifically, they look at the organizational and program elements of government performance, whether government is achieving something that needs doing at a reasonable cost, and consider whether government managers are:

- making the best use of public funds; and
- adequately accounting for the prudent and effective management of the resources entrusted to them.

The aim of these audits is to provide the Legislature with independent assessments about whether government programs are implemented and administered economically, efficiently and effectively, and whether Members of the Legislative Assembly and the public are being provided with fair, reliable accountability information with respect to organizational and program performance.

In completing these audits, we collect and analyze information about how resources are managed; that is, how they are acquired and how they are used. We also assess whether legislators and the public have been given an adequate explanation of what has been accomplished with the resources provided to government managers.

Focus of Our Work

A risk audit has been described as:

> *...the independent, objective assessment of the fairness of management's representations on organizational and program performance, or the assessment of management performance, against criteria, reported to a governing body or others with similar responsibilities.*

This definition recognizes that there are two forms of reporting used in risk auditing. The first—referred to as attestation reporting—is the provision of audit opinions as to the fairness of management's publicly reported accountability information on matters of economy, efficiency and effectiveness. This approach has been used to a very limited degree in British Columbia because the organizations we audit do not yet provide comprehensive accountability reports on their organizational and program performance.

We believe that government reporting along with independent audit is the best way of meeting accountability responsibilities. Consequently, we have been encouraging the use of this model in the British Columbia public sector, and will apply it where comprehensive accountability information on performance is made available by management.

As the risk audits conducted in British Columbia use the second form of reporting—direct reporting—the description that follows explains that model.

Our "direct reporting" risk audits are not designed to question whether government policies are appropriate and effective (that is achieve their intended outcomes). Rather, as directed by the Auditor General Act, these audits assess whether the programs implemented to achieve government policies are

being administered economically and efficiently. They also evaluate whether Members of the Legislative Assembly and the public are being provided with appropriate accountability information about government programs.

When undertaking risk audits, we look for information about results to determine whether government organizations and programs actually provide value for money. If they do not, or if we are unable to assess results directly, we then examine management's processes to determine what problems exist or whether the processes are capable of ensuring that value is received for money spent.

Selecting Audits

All of government, including Crown corporations and other government organizations, are included in the universe we consider when selecting audits. We also may undertake reviews of provincial participation in organizations outside of government if they carry on significant government programs and receive substantial provincial funding.

When selecting the audit subjects we will examine, we base our decision on the significance and interest of an area or topic to our primary clients, the Members of the Legislative Assembly and the public. We consider both the significance and risk in our evaluation. We aim to provide fair, independent assessments of the quality of government administration and to identify opportunities to improve the performance of government. Therefore, we do not focus exclusively on areas of high risk or known problems.

We select for audit either programs or functions administered by a specific ministry or government organization, or cross-government programs or functions that apply to many government entities. A large number of such programs and functions exist throughout government. We examine the larger and more significant of these on a cyclical basis.

Our view is that, in the absence of comprehensive accountability information being made available by government, risk audits using the direct reporting approach should be undertaken on a five- to six- year cycle so that Members of the Legislative Assembly and the public receive assessments of all significant government operations over a reasonable time period. We strive to achieve this schedule, but it is affected by the availability of time and resources.

Appendix D: Office of the Auditor General: Risk Auditing Objectives and Methodology

Planning and Conducting Audits

A risk audit comprises four phases—preliminary study, planning, conducting and reporting. The core values of the Office—independence, due care and public trust—are inherent in all aspects of the audit work.

Preliminary Study

Before an audit starts, we undertake a preliminary study to identify issues and gather sufficient information to decide whether an audit is warranted.

At this time, we also determine the audit team. The audit team must be made up of individuals who have the knowledge and competence necessary to carry out the particular audit. In most cases, we use our own professionals, who have training and experience in a variety of fields. As well, we often supplement the knowledge and competence of our staff by engaging one or more consultants to be part of the audit team.

In examining a particular aspect of an organization to audit, auditors can look either at results, to assess whether value for money is actually achieved, or at management's processes, to determine whether those processes should ensure that value is received for money spent. Neither approach alone can answer all the questions of legislators and the public, particularly if problems are found during the audit. We therefore try to combine both approaches wherever we can. However, because acceptable results-oriented information and criteria are often not available, our risk audits frequently concentrate on management's processes for achieving value for money.

If a preliminary study does not lead to an audit, the results of the study may still be reported to the Legislature.

Planning

In the planning phase, the key tasks are to develop audit criteria—"standards of performance"—and an audit plan outlining how the audit team will obtain the information necessary to assess the organization's performance against the criteria. In establishing the criteria, we do not expect theoretical perfection from public sector managers; rather, we reflect what we believe to be the reasonable expectations of legislators and the public.

Conducting

The conducting phase of the audit involves gathering, analyzing and synthesizing information to assess the organization's performance against the audit criteria. We use a variety of techniques to obtain such information, including surveys, and questionnaires, interviews and document reviews.

Reporting Audits

We discuss the draft report with the organization's representatives and consider their comments before the report is formally issued to the Legislative Assembly. In writing the audit report, we ensure that recommendations are significant, practical and specific, but not so specific as to infringe on management's responsibility for managing. The final report is tabled in the Legislative Assembly and referred to the Public Accounts Committee, where it serves as a basis for the Committee's deliberations.

Reports on risk audits are published throughout the year as they are completed, and tabled in the Legislature at the earliest opportunity. We report our audit findings in two parts: an Auditor General's Comments section and a more detailed report. The overall conclusion constitutes the Auditor General's independent assessment of how well the organization has met performance expectations. The more detailed report provides background information and a description of what we found. When appropriate, we also make recommendations as to how the issues identified may be remedied.

It takes time to implement the recommendations that arise from risk audits. Consequently, when management first responds to an audit report, it is often only able to indicate its intention to resolve the matters raised, rather than to describe exactly what it plans to do.

Without further information, however, legislators and the public would not be aware of the nature, extent, and results of management's remedial actions. Therefore, we publish updates of management's responses to the risk audits. In addition, when it is useful to do so, we will conduct follow-up audits. The results of these are also reported to the Legislature.

Appendix E: Office of the Auditor General: 2003/04 Reports Issued to Date

Report 1

A Review of Performance Agreements Between the Ministry of Health Services and the Health Authorities

Report 2

Follow-up of Performance Reports, August 2003

Report 3

Adopting Best Practices in Government Financial Statements – 2002/2003

Report 4

Alternative Payments to Physicians: A Program in Need of Change

Report 5

Monitoring the Government's Finances

Report 6

Audit of the Government's Review of Eligibility for Disability Assistance

This report and others are available on our website at http://www.bcauditor.com

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